CALIFORNIA LIQUID WASTE HAULER RECORD STATE WATER RESOURCES CONTROL BOARD

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STATE DEPARTMENT OF HEALTH STUDY RECORDS CTR			
PRODUCER OF WASTE (Mu			HAULER OF WASTE (Must be filled by hauler) 999000243
Namu AL J N N (PRINT OIL TYPE) Pick up Address:	CO. AMER	CA CODE NO.	ASBURY OIL CO. 13419 Halldale Ave., Gardena, California 90249 Phone: (213) 321-1392
Name ALL N M CO. AMERICA Pick up Address: [NUMBER] (STREET) (CITY) Telephone Number: () P.O. or Contract No. 2 770 749			Pick Up: Time: Lipm
			State Liquid Waste Hauler's Registration No. (if applicable): 15
Type of Process which Produced Wastes:			Job No.: No. of Loads or Trips: Unit No
(Examples: metal plating, equipment cleaning, oil drilling			Vehicle: vacuum truckbarrels, flatbed, other(specify)
DESCRIPTION OF WASTE (Must be filled by producer)			The described waste was hauled by me to the disposal facility named below and was accepted.
Check type of wastes:			I certify (or declare) under penalty of perjury
1. T Acid solution	6. 🗍 Tetraethyl lead sludge	11. 🗋 Contaminated soil and sand	that the foregoing is true and correct.
2. [] Alkaline solution	7. Chemical toilet wastes	12. [] Cannery waste	DISPOSER OF WASTE (Must be filled by disposer)
3. [] Pesticides	8. 🗍 Tank bottom sediment	13. 🗒 Latex waste	[
4. l Paint sludge	9. L.) oii	14. 🚨 Mud and water	Name (print or type):
5. L.) Solvent	10. [] Drilling mud	15. 🗀 Brine	Site Address:
[] Other (Specify) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			The hauler above delivered the described waste to this disposal facility and it was an acceptable material under the terms of RWQCB requirements, State Department of Health regulations, and
Components: (Examples: Hydrochloric acid, lime, caustic soda, Concentration: phenolics, solvents (list), metals (list), Upper Lower % ppm organics (list), cyanide)			local restrictions. Quantity measured at site (if applicable):State fee (if any):
			Handling Method(s):
		# #	recovery
2.			treatment (specify):
3.			treatment (specify): (EXAMPLES: INCINERATION, NEUTRALIZATION, PRECIPITATION) CODE NO.
4.			Clisposal (specify): pond Spreading Clianotili Clinjection well
``		- — H H	Other (specify):
5.			If waste is held for disposal elsewhere specify final location:
6.			Disposal Date:
Hazardous Properties of Wast	te:	☐ corrosive ☐ explosive	I certify (or declare) under penalty of perjury that the foregoing is true and correct.
pH [] non	ne Litoxic Liftammable	Corrosive C exprosive	MONATURE OF AUTHORIZED AGENT AND TITLE
Bulk Volume:	Dgal Dions D	barrels -(42 gal.) Other	The site operator shall submit a legible copy of each completed Record to the State Department of Health with monthly fee reports.
Containers: NUMBER)	Cartons C	bags Other TANK	Ωu
Physical State:	🛘 solid 🍱 liquid 🔼	sludge other	
Special Handling Instructions (if any):			/ /
MALL			K001175
The waste is described to the applicable).	best of my ability and it was deliver	ed to a licensed liquid waste hauler (if	
I certify (or declare) under penalty of perjury that the foregoing is true and correct.			FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424 9300.

D.O.T. Proper Shipping Name_